

**RECORDING REQUESTED BY**

WHEN RECORDED MAIL TO  
AND MAIL TAX STATEMENTS TO

NAME

ADDRESS

CITY  
STATE & ZIP

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**(Title of Document)**

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**APN NO.**

THE UNDERSIGNED GRANTOR(S) DECLARE(S)

DOCUMENTARY TRANSFER TAX is \$ \_\_\_\_\_, if exempt, give Code Section \_\_\_\_\_  
 Computed on full value of property conveyed, or  
 Computed on full value less value of liens or encumbrances remaining at time of sale,  
 Unincorporated area:  City of \_\_\_\_\_.

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Signature of party determining Transfer tax